



**POLICY SCHEDULE FOR BURGLARY (Single Location) INSURANCE**

**UIN NUMBER - IRDAN190P0098100001**

|                         |   |                               |  |
|-------------------------|---|-------------------------------|--|
| <b>Insured's Name</b>   | : MATERRA INDIA PRIVATE LIMITED   |                               |  |
| <b>Insureds Details</b> |   | <b>Issuing Office Details</b> |  |
| <b>Customer ID</b>      | : POA2683593  | <b>Office Code</b>            | : BRANCH AURANGABAD AUTO TIE-UP (160401)   |
| <b>Address</b>          | : 4TH FLOOR, A 406, PRIVILON BUILDING, ISCON AMBALI ROAD, OFF S GHIGHWAY, AHMEDABAD, AHMEDABAD ,GUJARAT, 380054 | <b>Address</b>                | : THE NEW INDIA ASSURANCE CO. LTD. AUTO TIE-UP CITY BRANCH ( 160401 ) "JEEVAN SUMAN" BUILDING, PLOT NO. 3, N-5, CIDCO, AURANGABAD,431003 |
| <b>Phone No</b>         | :   | <b>Phone No</b>               | : 02402485446 / 02402484415  |
| <b>E-mail/Fax</b>       | : pancholi.tejas@gmail.com, /   | <b>E-mail/Fax</b>             | : nia.160401@newindia.co.in /  |
| <b>PAN No</b>           | :   | <b>S.Tax Regn. No</b>         | : AAACN4165CST178  |
| <b>GSTIN/UIN</b>        | : 24AAOCM9975D1ZY / NA  | <b>GSTIN</b>                  | : 27AAACN4165C3ZP  |
|                         |   | <b>SAC</b>                    | : 997139 (Other non-life insurance services excl RI)   |

|                            |   |   |   |
|----------------------------|---|---|---|
| <b>Policy Details</b>      |   |   |   |
| <b>Policy Number</b>       | : 16040146220100000146                                    | <b>Business Source Code</b>                                       |   |
| <b>Period of Insurance</b> | : From: 17/01/2023 04:29:24 PM To: 16/07/2023 11:59:59 PM | <b>Dev.Off. level/Broker/Corp. Agent/Web Aggregator/CPSC User</b> | : Jainuine Insurance Brokers Pvt. Ltd. - (DA3388757)<br>Jainuine Insurance Brokers Pvt.Ltd. - (SI00028623), |
| <b>Date of Proposal</b>    | : 17-Jan-23   | <b>Agent/Bancassurance/S pecified Person</b>                      | :   |
| <b>Prev. Policy no.</b>    | :   | <b>Phone No</b>   | : 02402350377, 9850049400 / NA  |
| <b>Client Type</b>         | : Non-Corporate   | <b>E-mail/Fax</b>   | : kailash@jainuineinsurance.co.in, / /  |

|                         |               |  |                                     |                                     |
|-------------------------|---------------|--|-------------------------------------|-------------------------------------|
| <b>Premium(₹)</b>       | <b>GST(₹)</b> | <b>Total(₹)</b>  | <b>Total (₹ in words)</b>           | <b>Receipt No. &amp; Date</b>       |
| 104                     | 19            | 124  | RUPEES ONE HUNDRED TWENTY-FOUR ONLY | 1604018122000000335<br>9 - 17/01/23 |
| <b>Location Details</b> |               | : SaiKrishna Cotton Industries,<br>At - Kotadi (Pilvai road), Ta - Vijapur, Dist - Mehsana |                                     |                                     |

|                              |      |
|------------------------------|------|
| <b>First Loss Percentage</b> | : NA |
|------------------------------|------|

**Details of assets covered under the Policy**

|                        |                                     |                    |
|------------------------|-------------------------------------|--------------------|
| <b>Stocks in Trade</b> |                                     |                    |
| <b>Sl. No.</b>         | <b>STOCK DETAILS</b>                | <b>Sum Insured</b> |
| 1                      | All stock of cotton,cotton FP bales | 1500000            |

|  |                           |                    |
|--|---------------------------|--------------------|
| <b>Goods held in Trust / Commision</b> |                           |                    |
| <b>Sl. No.</b>                         | <b>GOODS HELD DETAILS</b> | <b>Sum Insured</b> |
| 1                                      | NA                        | 0                  |

|                                       |   |                    |
|---------------------------------------|---|--------------------|
| <b>Furniture / Fixture / Fittings</b> |   |                    |
| <b>Sl. No.</b>                        | <b>FURNITURE/FIXTURE/FITTINGS DETAILS</b> | <b>Sum Insured</b> |
| 1                                     | NA  | 0                  |

|                          |                                 |                    |
|--------------------------|---------------------------------|--------------------|
| <b>Office Equipments</b> |                                 |                    |
| <b>Sl. No.</b>           | <b>OFFICE EQUIPMENT DETAILS</b> | <b>Sum Insured</b> |
| 1                        | NA                              | 0                  |

|                               |                                      |                    |
|-------------------------------|--------------------------------------|--------------------|
| <b>Coins / Currency notes</b> |                                      |                    |
| <b>Sl. No.</b>                | <b>COINS/CURRENCY/CURIOS DETAILS</b> | <b>Sum Insured</b> |
| 1                             | NA                                   | 0                  |

|                                  |
|----------------------------------|
| <b>Description of other item</b> |
|----------------------------------|



| Sl. No. | OTHER ITEM DETAILS | Sum Insured |
|---------|--------------------|-------------|
| 1       | NA                 | 0           |

| Add on Covers   | Sum Insured (₹) |
|-----------------|-----------------|
| Other Extension | NOT OPTED       |
| Theft Extension | NOT OPTED       |
| Terrorism       | NOT OPTED       |

|                    |   |   |
|--------------------|---|---|
| Special Conditions | : | SaiKrishna Cotton Industries,<br>At - Kotadi (Pilvai road), Ta - Vijapur, Dist - Mehsana, Gujarat, 382870 |
| Excess             | : | 1000  |

This Policy shall subject to BURGLARY policy clauses attached herewith.

**Premium and GST Details**

|         | Rate of Tax | Amount in INR |
|---------|-------------|---------------|
| Premium |             | ₹ 104.00      |
| SGST    | 0           | 0             |
| CGST    | 0           | 0             |
| IGST    | 18          | 19            |

In witness whereof the undersigned being duly authorised by the Insurers and on behalf of the Insurers has (have) hereunder set his (their) hand(s) on this 17th day of January,2023.

For and on behalf of  
The New India Assurance Company Limited

Date of Issue: 17/01/2023

Duly Constituted Attorney(s)

Mudrank \_\_\_\_\_ Dt. \_\_\_\_\_ consolidated Stamp Fees Paid by Pay Order Number \_\_\_\_\_ vide receipt number \_\_\_\_\_ dt. \_\_\_\_\_. Stamp Duty under the Policy is ₹1/-.

We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

Tax Invoice No : 16040122P0005280

**IRDA Registration Number: 190**  
**NIA PAN NUMBER: AAACN4165C**